

Work Order ID 131652

Tuesday, April 21, 2015 8:01:13 AM

131652

PRELIMINARY ISSUE

Page 1

Item ID: D5241-041
Revision ID: PRELIM
Item Name: Display Casing Assembly



Accept

N900040100

Setup Start ***NS1***

Stop ***NS2***

Start Date: 4/21/2015 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 4/21/2015 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: MCS Date: 1504-21 Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D5241	P A3

110 0.00

110

Small Fab Memo 0.00
Small Fab ASSEMBLE AS PER DWG

1 FF APR 29 2015

120 QC5- Inspect part completeness to step on W/O 0.00

120

QC Memo 0.00
Quality Control

(1) DAS
38
9-89
APR 29 2015

130 0.00

130

SprayPaint Memo 0.00
Spray Painting PAINT ONLY SCREWS AS PER DWG NOTE 2

1 DAS
41
9-89

FLAT BLACK PAINT BATCH: 131561

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Cross tube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>			
Date :	Step #:	QTY Effective :		MRB (QSI042) Approval Completed By Lead hand / Supervisor Approval Verification QC / QA Coordinator Approval	
Description Work Order Deviation		Disposition			

Root Cause		FAULT CATEGORY			
Environment <input type="checkbox"/>	No Re-verification <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>
Design <input type="checkbox"/>	Operator <input type="checkbox"/>	Bending <input type="checkbox"/>	Set-up <input type="checkbox"/>	Folio/Program <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>
Doc/Data <input type="checkbox"/>	Offset/Setup <input type="checkbox"/>	Centre Not Concentric <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>
Equip/Tooling <input type="checkbox"/>	Supplier <input type="checkbox"/>	Cracks <input type="checkbox"/>	Broken/Damage/Defect <input type="checkbox"/>	Weld <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>
Handling/Pre <input type="checkbox"/>	Training <input type="checkbox"/>	Crimp/Kink/Ripple/Wave <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>
Material <input type="checkbox"/>	Use for Testing <input type="checkbox"/>	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>	Part Moved <input type="checkbox"/>
Internal Transport <input type="checkbox"/>	Poor Information <input type="checkbox"/>	Crushing <input type="checkbox"/>	Countersink <input type="checkbox"/>	Off-set <input type="checkbox"/>	Drawing <input type="checkbox"/>
Tribal Knowledge <input type="checkbox"/>	Rushing <input type="checkbox"/>	Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Finish <input type="checkbox"/>
LOA <input type="checkbox"/>	Product Improvement <input type="checkbox"/>	Wave/Twist in Tube <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Fit/Function <input type="checkbox"/>	Misread <input type="checkbox"/>
Substation <input type="checkbox"/>	Process Improvement <input type="checkbox"/>	Marks/Chatter <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>	Turning Sequence <input type="checkbox"/>
Past Expiry Date <input type="checkbox"/>	Manufacturing Process <input type="checkbox"/>	OTHER : _____			
Misidentified <input type="checkbox"/>	Past Due <input type="checkbox"/>				

Work Order ID 131652

Tuesday, April 21, 2015 8:01:13 AM

131652

PRELIMINARY ISSUE

Page 2

Item ID: D5241-041 Accept *N9000040100* Setup Start *NS1*
 Revision ID: PRELIM Stop *NS2*
 Item Name: Display Casing Assembly
 Start Date: 4/21/2015 Start Qty: 1.00 *1* Cust Item ID:
 Required Date: 4/21/2015 Req'd Qty: 1.00 *1* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	QC14- Inspect Spray Paint	0.00							38 9-89
140									
QC	Memo	0.00							
Quality Control									APR 29 2015
150	Identify as per dwg & Stock Location: <u>Relia</u>	0.00							
150									
Packaging	Memo	0.00							DAS 9 9-89
Packaging									
160	QC21- Final Inspection - Work Order Release	0.00							
160									
QC	Memo	0.00							
Quality Control									

131652-01

POSITIVE RECALL

EFFECTIVE 15-04-21 AUTH M.L.S

RELEASED _____ DATE _____

RD15-1004-02

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____		DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Cross tube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Date :		Step #:		QTY Effective :			MRB (QS1042) Approval Completed By Lead hand / Supervisor Approval Verification QC / QA Coordinator Approval		
Description Work Order Deviation				Disposition					

Root Cause				FAULT CATEGORY			
Environment <input type="checkbox"/>	<input type="checkbox"/>	No Re-verification	<input type="checkbox"/>	Pressure/Forced	<input type="checkbox"/>	Temperature/Cure	<input type="checkbox"/>
Design <input type="checkbox"/>	<input type="checkbox"/>	Operator	<input type="checkbox"/>	Bending	<input type="checkbox"/>	Set-up	<input type="checkbox"/>
Doc/Data <input type="checkbox"/>	<input type="checkbox"/>	Offset/Setup	<input type="checkbox"/>	Centre Not Concentric	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>
Equip/Tooling <input type="checkbox"/>	<input type="checkbox"/>	Supplier	<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Broken/Damage/Defect	<input type="checkbox"/>
Handling/Pre <input type="checkbox"/>	<input type="checkbox"/>	Training	<input type="checkbox"/>	Crimp/Kink/Ripple/Wave	<input type="checkbox"/>	Inspection Incomplete/Unqualified	<input type="checkbox"/>
Material <input type="checkbox"/>	<input type="checkbox"/>	Use for Testing	<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>
Internal Transport <input type="checkbox"/>	<input type="checkbox"/>	Poor Information	<input type="checkbox"/>	Crushing	<input type="checkbox"/>	Countersink	<input type="checkbox"/>
Tribal Knowledge <input type="checkbox"/>	<input type="checkbox"/>	Rushing	<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>
LOA <input type="checkbox"/>	<input type="checkbox"/>	Product Improvement	<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>
Substation <input type="checkbox"/>	<input type="checkbox"/>	Process Improvement	<input type="checkbox"/>	Marks/Chatter	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>
Past Expiry Date <input type="checkbox"/>	<input type="checkbox"/>	Manufacturing Process	<input type="checkbox"/>	OTHER :			
Misidentified <input type="checkbox"/>	<input type="checkbox"/>	Past Due	<input type="checkbox"/>				

Picklist Print

Tuesday, April 21, 2015 8:01:18 AM

PRELIMINARY ISSUE

Page 1

Work Order ID: 131652

131652

Parent Item: D5241-041

D5241-041

Parent Item Name: Display Casing Assembly

Start Date: 4/21/2015

Required Date: 4/21/2015

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 15.04.20 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D5242-041		Manufactured	No				Each	0.0000		2			
X *D5242-041*				B 131 654					**	2	FF	APR 29 2015	
Display Casing End Cap Assembly													
D5243-041		Manufactured	No				Each	0.0000		1			
X *D5243-041*				B 131 665					**	1	FF	APR 29 2015	
Display Casing Cover Assembly													
D5243-3		Manufactured	No				Each	0.0000		1			
X *D5243-3*				B 131 666					**	1	FF	APR 29 2015	
Display Casing Cover													
MS24693-S25		Purchased	No				Each	100.0000		8			
MS24693-S25									**		FF	APR 29 2015	
Screw													

Location

Loc Qty

Loc Code

Mezz

100

119438

100

8

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

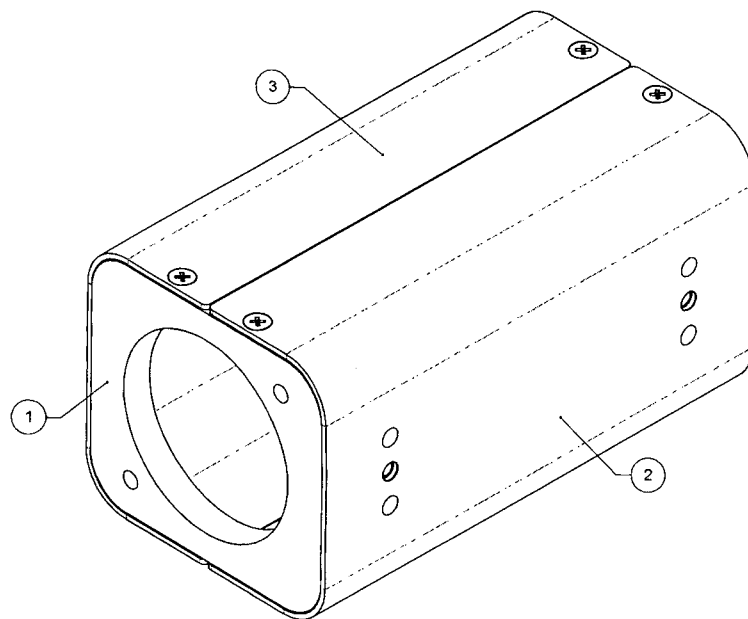
QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Cross tube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>			
Date :	Step #:	QTY Effective :		MRB (QS1042) Approval Completed By Lead hand / Supervisor Approval Verification QC / QA Coordinator Approval	
Description Work Order Deviation		Disposition			
Root Cause <div style="display: flex;"> <div style="flex: 1;"> Environment <input type="checkbox"/> Design <input type="checkbox"/> Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Handling/Pre <input type="checkbox"/> Material <input type="checkbox"/> Internal Transport <input type="checkbox"/> Tribal Knowledge <input type="checkbox"/> LOA <input type="checkbox"/> Substation <input type="checkbox"/> Past Expiry Date <input type="checkbox"/> Misidentified <input type="checkbox"/> </div> <div style="flex: 1;"> No Re-verification <input type="checkbox"/> Operator <input type="checkbox"/> Offset/Setup <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Use for Testing <input type="checkbox"/> Poor Information <input type="checkbox"/> Rushing <input type="checkbox"/> Product Improvement <input type="checkbox"/> Process Improvement <input type="checkbox"/> Manufacturing Process <input type="checkbox"/> Past Due <input type="checkbox"/> </div> </div>		FAULT CATEGORY <div style="display: flex;"> <div style="flex: 1;"> Pressure/Forced <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Wave/Twist in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> </div> <div style="flex: 1;"> Temperature/Cure <input type="checkbox"/> Set-up <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Drill Holes <input type="checkbox"/> </div> <div style="flex: 1;"> Power Loss/Surge <input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Off-set <input type="checkbox"/> Mislabeled <input type="checkbox"/> Fit/Function <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> </div> <div style="flex: 1;"> Positioned Wrong <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Misread <input type="checkbox"/> Turning Sequence <input type="checkbox"/> </div> </div>			
		OTHER : <input type="checkbox"/>			

PRELIMINARY ISSUE

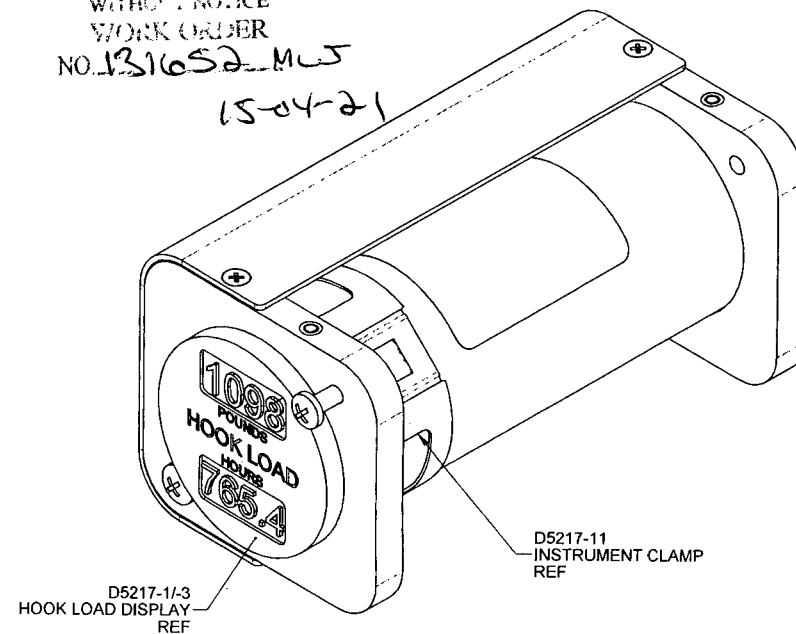
ITEM	QTY	P/N	DESCRIPTION
	X	D5241-041	DISPLAY CASING ASSY
1	2	D5242-041	DISPLAY CASING END CAP ASSY
2	1	D5243-041	DISPLAY CASING COVER ASSY
3	1	D5243-3	DISPLAY CASING COVER
4	8	MS24693-S25	SCREW, CSK 100*



D5241-041 DISPLAY CASING ASSY

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 131652-MJS

15-04-21



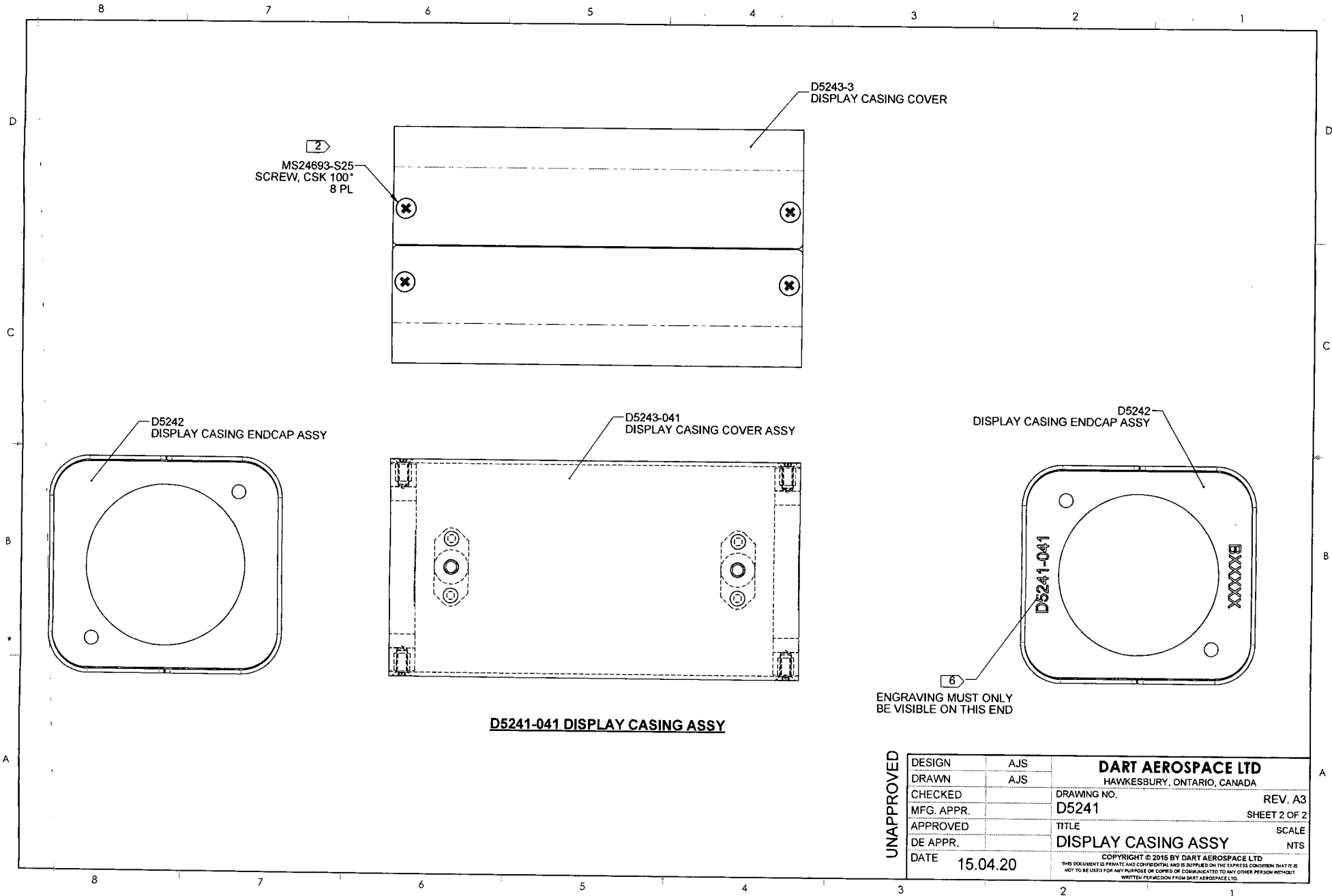
NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: PAINT SCREWS HEADS
PAINT MATTE BLACK PER DART QSI 005 4.2.2.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: PART NUMBER IS ENGRAVED ON DRAWING D5242
- 7) WEIGHT: 0.51 lbs

UNAPPROVED

A		NEW ISSUE		AJS	15.01.20
REV.		DESCRIPTION		BY	DATE
DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA			
DRAWN	AJS				
CHECKED		DRAWING NO.		REV. A3	
MFG. APPR.		D5241		SHEET 1 OF 2	
APPROVED		TITLE		SCALE	
DE APPR.		DISPLAY CASING ASSY		NTS	
DATE	15.04.20	COPYRIGHT © 2015 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			

PRELIMINARY ISSUE



UNAPPROVED

DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED		DRAWING NO.	REV. A3
MFG. APPR.		D5241	SHEET 2 OF 2
APPROVED		TITLE	SCALE
DE APPR.		DISPLAY CASING ASSY	NTS
DATE	15.04.20	<small>COPYRIGHT © 2015 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	